

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	70205	4-22-99
O.I.P.E. CLASSIFIER		8	5-8-99
FORMALITY REVIEW		105955	5/19/99 9/07

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	1/11/2
2	8/29/02
3	5/15/02
4	7/17/02
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Claim	Date
Final	
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1	1/17/02
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Claim	Date
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101	1/12/02
102	8/29/02
103	5/15/02
104	7/17/02
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If more than 150 claims or 10 actions  
 staple additional sheet here

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